

State of Alaska DHSS Commentary on FCC Further Notice of Proposed Rulemaking Issued December 23, 2003

Issue	FCC Comments	AK DHSS Comments
1. Definition of Rural Area	Currently an area qualifies as rural if it is located in a non-metropolitan county as defined by the OMB or is specifically identified in the Goldsmith Modification to 1990 Census data published by the Office of Rural Health Policy.	DHSS opposes changes to the definition of rural that would mean exclusion of any rural communities currently eligible. The broad bandwidth for small rural area health programs is critical for the provision of general and specialty medical services for their population. These small programs would not be able to shoulder the burden of the added expense that would occur if they were to become ineligible for USF support. Using the 1990 census, the definitions of Rural and Urban would not have adverse effects on eligibility for rural health programs for USF in Alaska. However, this may change with 2000 census data. Additional analysis will need to be done when Rural/Urban Community Area (RUCA) codes are adjusted for that data. Depending on the specific definition in using RUCA, areas such as Juneau and Kenai in Alaska could be affected adversely.
2. Satellite Telecommunications services for mobile rural health clinics.	Same rules apply as for permanent rural health clinics. Satellite services can be supported, but capped at the comparable land based services.	Since currently, there are no mobile units that provide telemedicine services in Alaska, there will be no immediate effect on rural health services in Alaska. For future considerations, we urge a maximum level of flexibility for Universal Services Administrative Company, Rural Health Care Division, to allow support for such mobile stations.
3. Streamlining the application process.	FCC acknowledges that USAC has implemented some significant changes in policy to ease the burdens on rural health providers in the application process.	AK DHSS supports multi year contracts being supported by USAC to enhance efficiency and save on administrative costs. This includes eliminating the requirement of the health provider to post a 465 (initial application for support) each year of the contract period. This is especially beneficial for small entities in Alaska with minimal administrative support available for the health clinic.
4. Enhancing outreach services.	FCC seeks comment on how it can increase its outreach services to educate rural health providers so they can benefit from the USAC rural health support mechanism.	AK DHSS currently employs a staff person who facilitates the outreach process for Alaska. He maintains regular contact for key regional health providers and small hospitals in Alaska to ensure that they are aware of the program and their potential eligibility. Likewise, he is the lead contact for State DHSS for USAC Rural Health, and we propose that he continue in that role, assisting USAC in maximizing outreach services in Alaska. We request that the designated DHSS staff person receive formal ongoing training on all aspects of USAC and USF Rural Health Care support (i.e. application, follow-up forms, funding commitment procedures, etc.)

These comments can be emailed this webpage: Federal Communications Commission at: <http://www.fcc.gov/cgb/ecfs>

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Regarding: WC Docket 02-60 USAC Rural Health Care Support Mechanism

February 19, 2004

Federal Communications Commission
Office of the Secretary
445 12th Street SW
Washington, DC 2054

Dear FCC Secretary:

Attached are the official comments from the State of Alaska, Department of Health and Social Services. I appreciate the opportunity to comment on proposed policy changes for the Universal Services Administrative Company (USAC), a program whose telecommunications funding support has had a profound and positive impact on our rural health programs in Alaska. Many of our isolated rural communities could not have a telemedicine program without that support.

I offer comments on the following proposed rulemaking areas:

1. Definition of Rural Area: With the high cost of telecommunications in remote areas of Alaska, I oppose any changes to this definition that would eliminate any of our communities from eligibility for Universal Service Fund (USF) support.
2. Satellite Telecommunications: Currently there are no mobile telemedicine stations in Alaska. However, on principle, we urge flexibility so that, in the future, such mobile telemedicine stations can receive maximum support so Alaska telemedicine can be highly responsive to, and have the capacity, to respond to local health care needs.
3. Streamlining the Application Process: Many of our smaller rural health care programs can benefit from a streamlined application process, saving administrative costs associated with annual applications. I support multi-year contracts to help realize such savings.
4. Enhancing Outreach Services: We employ within the Alaska Department of Health and Social Services an individual who we designate to assist USAC with their outreach efforts. I propose we continue this relationship with USAC staff.

Sincerely,

Joel Gilbertson
Commissioner

JSG:lb